

UNITED STATES DISTRICT COURT  
DISTRICT OF SOUTH CAROLINA  
(\_\_\_\_\_ DIVISION)

_____ ,	)	
Plaintiff/Petitioner/USA,	)	Case No. _____
	)	
v.	)	
_____ ,	)	<b>Motion</b>
Defendant/Respondent.	)	<b>in Support of</b>
_____	)	<b>Pro Hac Vice Application</b>

The undersigned local counsel hereby moves, together with the attached Application and Affidavit, that \_\_\_\_\_ be admitted *pro hac vice* in the above-captioned case as associate counsel. As local counsel, I understand that:

1. I will personally sign and include my District of South Carolina federal bar attorney identification number on each pleading, motion, discovery procedure, or other document that I serve or file in this court; and
2. All pleadings and other documents that I file in this case will contain my name, firm name, address, and phone number and those of my associate counsel admitted *pro hac vice*; and
3. Service of all pleadings and notices as required shall be sufficient if served upon me, and it is my responsibility to serve my associate counsel admitted *pro hac vice*; and
4. Unless excused by the court, I will be present at all pretrial conferences, hearings, and trials and may attend discovery proceedings. I will be prepared to actively participate if necessary.
5. Certification of Consultation (Local Civil Rule 7.02).

- ☐ Prior to filing this Motion, I conferred with opposing counsel who has indicated the following position as to this Motion: ☐ will likely oppose; ☐ does not intend to oppose
- ☐ Prior to filing this Motion, I attempted to confer with opposing counsel but was unable to do so for the following reason(s):  
\_\_\_\_\_  
\_\_\_\_\_
- ☐ No duty of consultation is required because the opposing party is proceeding pro se.

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Name of Local Counsel

\_\_\_\_\_  
Street Address or Post Office Box

\_\_\_\_\_  
Signature of Local Counsel

\_\_\_\_\_  
City, State, Zip Code

Local Counsel for the \_\_\_\_\_

\_\_\_\_\_  
Telephone Number

District of South Carolina

Federal Bar Number \_\_\_\_\_

\_\_\_\_\_  
E-Mail Address